Approved for use through 09/30/2000.

PTO/SB/21 (6-98)

OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Application Number 09/243,237 NSMITTAL Filing Date 02/02/99 FORM MUKHOPADHYAY, Debasish First Named Inventor Group Art Unit 1723 Examiner Name Fortuna, A. No. Pages in this Attorney Docket No. MDO-2471-U-D1 submission ENCLOSURES (check all that apply) 図図 Assignment Papers Fee Transmittal Form After Allowance (for an application) Communication to Fee Attached Group Amendment/Response Drawing(s) Appeal Communication to Board of Appeals After Final and Interferences Licensing - related Affidavits/Declaration papers 冈 Extension of Time Petition to Convert Appeal Communication Requests (3 months) to a Provisional to Group Application Proprietary Information Express Abandonment Power of Attorney, Status Letter Request Revocation, Change \times Additional of Correspondence \bowtie Information Disclosure Address Enclosures Statement (Form 1449 identify below: with disclosed art) Terminal Disclaimer *Amendment Transmittal; Certified Copy of Small Entity Stmt. *Transmittal of Priority Document(s) Information Disclosure Statement Response to Missing Request for Refund Parts/Incomplete Application Return Receipt Card Response to Missing Parts under 37 CFR Remarks 1.52 or 1.53 Firm or Individual 32,466 R. Rea Reg. No.: Name Signature April 6, 2000 Date CERTIFICATE OF MAILING I hereby certify that this correspondence (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service as First Class Mail [express mail label EK686752394US] in an envelope addressed to Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: Typed or printed RHONDA GOODLOE name: 04/06/00 lae Date Signature

PTO/SB/17 (12/98)

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE pond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMIT for FY 2000

Under the Paperwork Reduction Act of 1995, no persons are required to re

Patent fees are subject to annual revision Patent rees are surject to annual revision.

Patent rees are surject to annual revision.

Patent rees are supported by a small entity statement, so English PTO/SB/09-12 large entity fees must be paid. See Forms PTO/SB/09-12.

SUBTOTAL (2)

(\$)

Complete if Known				
Application Number	09/243,237			
Filing Date	02/02/99			
First Named Inventor	Mukhopadhyay, Debasish			
Examiner Name	Fortuna, A.			
Group / Art Unit	1723			
Attorney Docket No.	MDO-2471-U-D1			

(\$) 1,910.00 પ્રજીૐÂL AMOUNT OF PAYMENT FEE CALCULATION (continued) METHOD OF PAYMENT (check one) 3. ADDITIONAL FEES The Commissioner is hereby authorized to charge Large Entity Small Entity Fee Fee Fee Fee 1. 🔀 indicated fees and credit any over payments to: Fee Paid Fee Description Code (\$) Code (\$) Deposit 07-1613 Account 130 205 65 Surcharge - late filing fee or oath Number Surcharge - late provisional filing fee or cover sheet. Deposit 50 227 25 Account R. Reams Goodloe, P.S. Name Non-English specification 139 130 139 130 Charge Any Additional Fee Required Under For filing a request for reexamination 147 2,520 147 2,520 37 C.F.R. §§ 1.16 and 1.17 Requesting publication of SIR prior to Examiner action 112 9201 112 920* 2. Payment Enclosed: Requesting publication of SIR after 113 1,840* Money 113 1,840* X Check Other Examiner action Order Extension for reply within first month 115 110 215 55 **FEE CALCULATION** Extension for reply within second month 116 380 216 190 1. BASIC FILING FEE 870.00 435 Extension for reply within third month 117 870 217 Large Entity Small Entity 1.360 218 680 Extension for reply within fourth month 118 Fee Description Fee Paid Extension for reply within fifth month Code (\$) Code (\$) 128 1.850 228 925 Notice of Appeal 101 690 201 345 Utility filing fee 119 300 219 Filing a brief in support of an appeal 106 310 206 155 Design filing fee 300 220 150 120 Plant filing fee Request for oral hearing 107 480 207 240 260 221 130 121 108 690 208 345 Reissue filing fee Petition to institute a public use proceeding 138 1.510 138 1.510 114 150 75 Provisional filing fee Petition to revive - unavoidable 110 240 55 SUBTOTAL (1) (\$) Petition to revive - unintentional 141 1,210 241 605 Utility issue fee (or reissue) 2. EXTRA CLAIM FEES 142 1,210 242 605 Fee from Design issue fee 243 215 143 430 Extra Claims ・・・ = _____ Xン × [below Fee Paid <u>50</u> -20 -Plant issue fee 540 144 580 244 290 Total Claims /8 ndependent Claims **9** X - 3** = 122 130 122 130 Petitions to the Commissioner 2 ø Multiple Dependent 50 123 50 260 123 **26**0 ₹ Petitions related to provisional applications or number previously paid, if greater; For Reissues, see below 126 240 126 240 Submission of Information Disclosure Stmt 240.00 Large Entity Small Entity 581 40 581 40 **Fee Description** Recording each patent assignment per Fee Code (\$) Code (\$) property (times number of properties) 146 760 246 380 203 Claims in excess of 20 Filing a submission after final rejection (37 CFR 1.129(a)) 103 18 9 102 78 202 39 Independent claims in excess of 3 149 760 249 380 For each additional invention to be 260 204 104 130 Multiple dependent claim, if not paid examined (37 CFR 1.129(b)) ** Reissue independent claims 109 78 209 39 over original patent Other fee (specify) 110 18 210 ** Reissue claims in excess of 20 Other fee (specify) and over original patent SUBTOTAL (3) 800.ºº (\$) 1,110.00

SUBMITTED B	Υ			Complete (if	applicable)
Typed or Printed Name	Reams Goodloe, Jr.,			Reg. Number	32,466
Signature	K. Keans Soulle	Date	04/06/00	Deposit Account User ID	4035

Reduced by Basic Filing Fee Paid

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231. EXPRESS MAIL LABEL NO.: EK686752394US

CERTIFICATE OF MAILING

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below in an envelope as "Express Mail Post Office to Addressee" mailing Label Number EK686752394US addressed to:

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Signature of Depositor

Rhonda Goodloe
Print Name of Depositor

Date: April 6, 2000

IN THE UNITED STATES

PATENT AND TRADEMARK OFFICE

Applicant:	MUKHOPADHYAY, Debasish)
Serial No.:	09/243,237	7) 10
Filed:	02/02/99	APR APR
Title:	HIGH PURITY WATER PRODUCED BY REVERSE OSMOSIS	CEIVED
Art Unit: Examiner:	1723 Fortuna, A.	ROOM

Assistant Commissioner for Patents Washington, D.C. 20231

AMENDMENT TRANSMITTAL

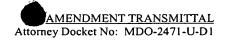
1. Transmitted herewith is an amendment for this application.

STATUS

2.	Appl	ica	nt	is			
		a	sma	all	entity.	Α	statement:
				is	attached	•	



☐ was a	lready filed.	
	a small entity.	
	EXTENSION OF TERM	
3. The proceedings the provisions of 37	herein are for a par CFR § 1.136 apply.	tent application and
(complet	e (a) or (b), as app	licable)
37 CFR § 1	petitions for an extended petitions for an extended of the contract of the con	1.17(a)(1)-(4) for
EXTENSION (months)	FEE FOR OTHER THAN SMALL ENTITY	FEE FOR SMALL ENTITY
one month	\$ 110.00	\$ 55.00
two months	\$ 380.00	\$ 190.00
★	\$ 870.00	\$ 435.00
four months	\$ 1,360.00	\$ 680.00
consider this a peti	ension of time is re	
	red. The fee paid the is deducted from tal months of extens	m the total fee due ion now requested.
Extension	fee due with this re-	quest: \$
	OR	
required. being made applicant	believes that no extension of the state of t	tional petition is possibility that erlooked the need





FEE FOR CLAIMS

4. The fee for claims (37 CFR § 1.16(b)-(d) has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	SMALL	ENTIT	Y
	CLAIMS REMAIN AFTER AMENDME		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	AI	DDITIONAL FEE
TOTAL	50	MINUS	20	= 30	x \$ 18	= :	5 40
TOTAL INDEP.	50	MINUS	20	= 30 = 6	x \$ 18 x \$39	= :	\$ 540 \$ Ø
INDEP.		MINUS	3				\$ \$

(complete (c) or (d), as applicable)

(c) \square No additional fee for claims is required.

OR

(d) Total additional fee for claims required \$ 800.

2QG 4/6/00 FEE PAYMENT

- 5. Attached is a checks in the sum of \$800.00 + 870.00.
 - Charge Account No. 07-1613 the sum of
 - A duplicate copy of this transmittal is attached.

FEE DEFICIENCY

 If any additional extension and/or fee is required, charge Account No. <u>07-1613</u>.

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SIGNATURE OF ATTORNEY

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98031-6426

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